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CONFIRMATION NO. 8599

Bib Data Sheet

|                             |  |              |                        |                                  |
|-----------------------------|--|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/755,086 | FILING OR 371(c)<br>DATE<br>01/09/2004<br>RULE | CLASS<br>435 | GROUP ART UNIT<br>1657 | ATTORNEY DOCKET NO.<br>96700/860 |
|-----------------------------|--|--------------|------------------------|----------------------------------|

**APPLICANTS**

David S. Lawrence, Hartsdale, NY;

**\*\* CONTINUING DATA \*\*\*\*\* DIA 1 C 40**

This appln claims benefit of 60/439,359 01/10/2003 and claims benefit of 60/505,097 09/22/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 03/30/2004

|   |                        |                     |                    |                          |
|---|------------------------|---------------------|--------------------|--------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY<br>NY | SHEETS DRAWING<br>9 | TOTAL CLAIMS<br>85 | INDEPENDENT CLAIMS<br>10 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                     |                    |                          |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |                        |                     |                    |                          |

**ADDRESS**

Alan D. Miller  
 AMSTER, ROTHSTEIN & EBENSTEIN LLP  
 90 Park Avenue  
 New York, NY10016

**TITLE**

Fluorescent assays for protein kinases

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|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1336 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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